

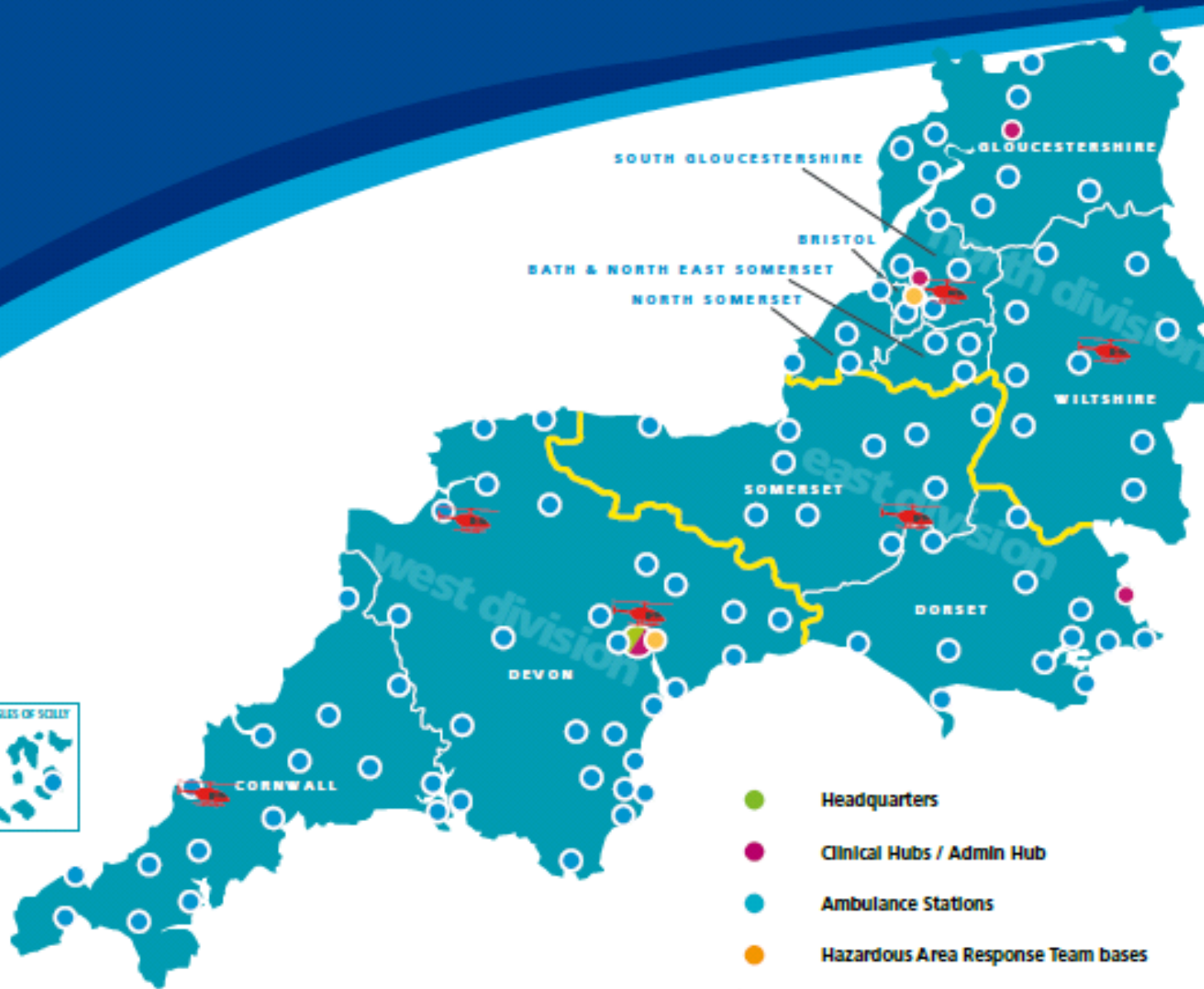


South Western Ambulance Service

Joanna Garrett – Clinical Development Officer, North



We cover
10,000
square miles
20%
of mainland
England



on

- Headquarters
- Clinical Hubs / Admin Hub
- Ambulance Stations
- Hazardous Area Response Team bases
- ✈ Air Ambulance bases
- Divisional boundary



what we do

2015/2016

911,378

emergency calls



↑24%



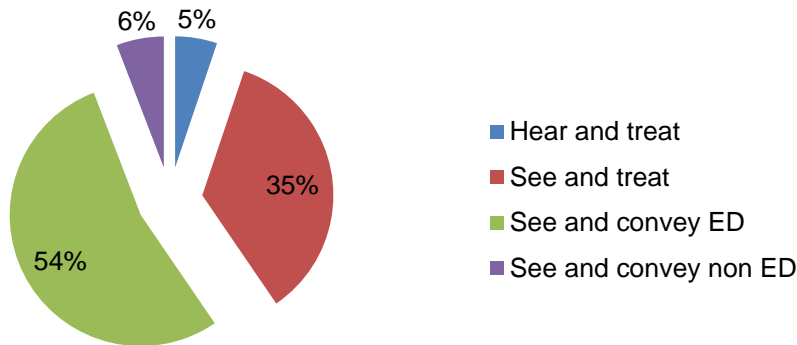
Care and Nursing Home Activity

- 1626 registered care and nursing homes (Nov 2016);
- Represents 3.5% total activity Trust wide, Bristol 2.2%;
- Approx 250 jobs a day in Bristol – 6 of them to care homes

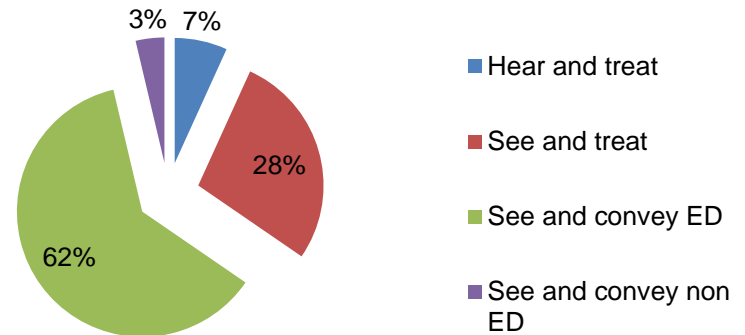


Care and Nursing Home Outcome

Outcome of calls from Care homes - Total



Outcome of calls from Care Homes - Bristol





Feedback themes

Theme	Example
Handover delay/issue e.g. No medical notes were available, care staff delayed, no patient info	<ul style="list-style-type: none">• EOL status DNAR/TEP/ADRT/POA• Notes locked in Office overnight• Commencement of CPR
Ambulance crews / hub staff reported concern for patient welfare	<ul style="list-style-type: none">• Lack of recognition/action for a deteriorating patient• Staffing levels
No medical intervention / admission required, only transport / equipment required	<ul style="list-style-type: none">• Falls• 'Check up' calls• Unhappy for patient to remain



Collaborative working

- Provider forums;
- Fallers;
- Care Home Pilots;
- CQUIN.



Fallers

	Top themes reported by staff	%	Frequency = n
1	HCP Referrals	24	1140
2	111 Referrals	21	1061
3	Fallers	17	821
4	OOH GP Referrals	5	256
5	Acute Hospital referrals	4	204
6	MIU Referrals	4	203
7	Referrals to other providers (NB. excludes Mental Health and Frequent Callers)	3.5	174



Fallers

- Minimal lifting policy;
- Challenges and barriers;
- Post fall guidance pack;
- Additional support.



'Not allowed to lift' process update

Hub and crews report incident

Incident is reviewed
1. listen to call
2. carer states 'no lift policy'?
3. patient conveyed?

Letter signed by
SWASFT Medical
Director and sent to
care provider

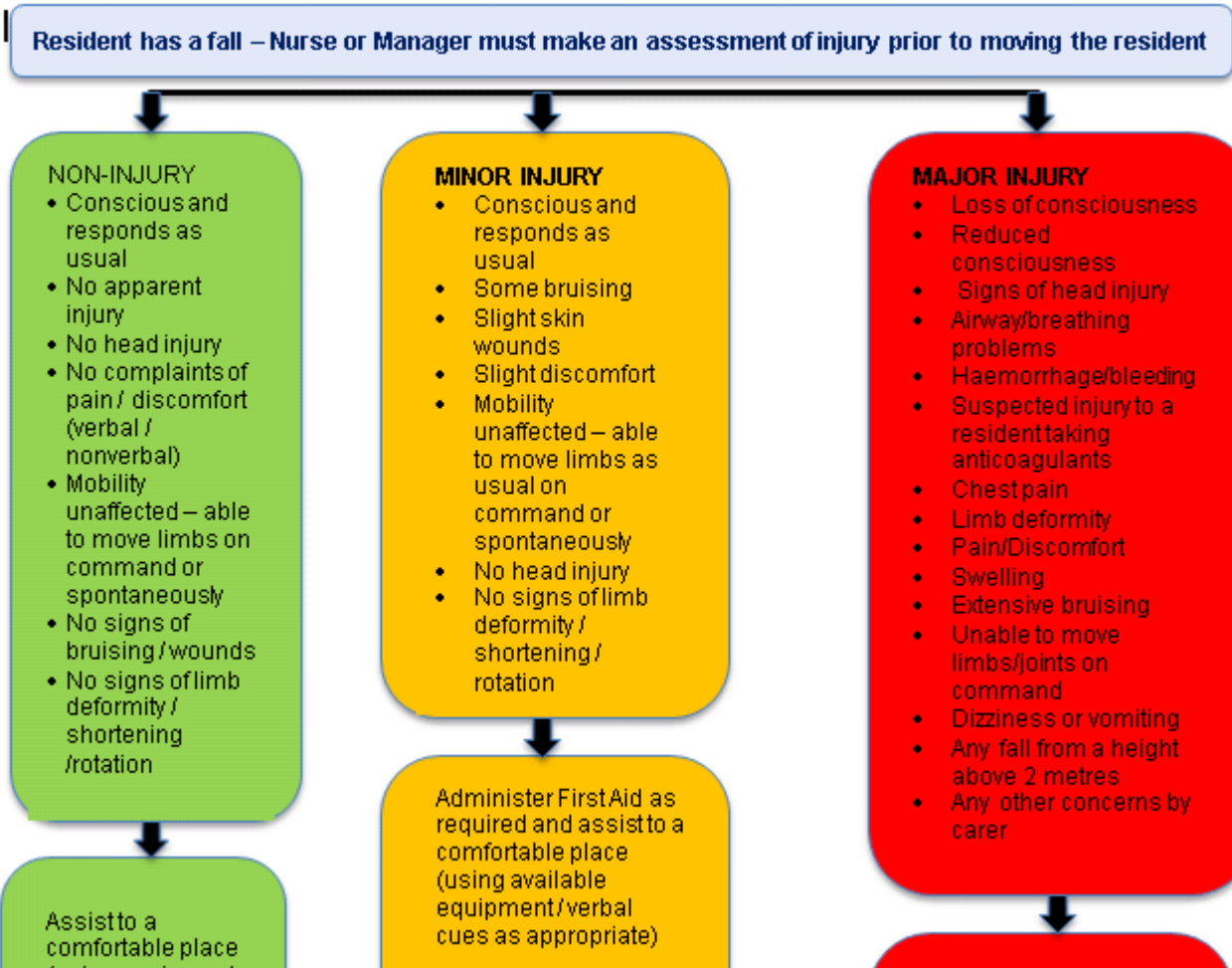
Escalation process
Aim to meet with care
provider to agree an
action to reduce
inappropriate
ambulance requests



POST FALL GUIDANCE PACK FOR CARE PROVIDERS



Guidance





Go

- Home
- About us
- What we do
- Get in touch
- FOI and Finding Information
- Campaigns**
- Recruitment
- Patient advice

You are here > [Home](#) > [Campaigns](#) > [Care Homes](#)

#hello my name is...

Alcohol awareness

Awards

Blue lights in your mirror

Care Homes

Choose Well

CRASH Card

Devon Atrial Fibrillation Pilot

Driving safely

Environmental Management Group

Festive spirit

Feeling under the weather

First aid

Flu

In case of emergency (ICE)

Keep the line free for me

Joint Emergency Services Interoperability Programme (JESIP)

Mental health

NHS Change Day

Norovirus

Organ donor campaign

Care Homes

Right Care, Right Place, Right Time - Reducing inappropriate conveyance to Emergency Departments

In order to meet the changing demand on health care and the increasing need to ensure that patients are directed to the service most appropriate to manage their clinical need, we have committed to work with key partners in health and social care to deliver this exciting initiative.

Right Care, Right Place, Right Time focuses on providing patients who make contact with the 999 service with the most appropriate care. It aims to provide care that meets the clinical need, is delivered by the most appropriate clinician and is provided at a location that is most suitable to the needs of the patient and of the wider health community.

Why is Right Care, Right Place, Right Time important?

The health community is seeing an increase in the number of patients attending Emergency Departments and ambulance activity as a whole is increasing on average by 4% per annum. With an average cost of £225 per patient per day when they are admitted and additional costs for operations and procedures, the financial pressures with the NHS are increasing substantially. To manage and mitigate these cost pressures the work to reduce those patients that attend Emergency Departments inappropriately both by the ambulance and walking through the door is vital to the success of the local health community.



- Bookmark
- Email
- Print

News

VOLUNTEER DRIVERS NEEDED

Do you own a car, have a few spare hours each week and a desire to do something positive for your local community? Then South Western Ambulance Service NHS Foundation Trust (SWASFT) would love to hear from you.

12/10/2015

[More news stories](#)



Training videos





Where can improvements be made - providers?

- Appropriate person make the 999 call;
- Good patient history;
- Anticipatory risk assessments and care plans;
- Available paperwork;



Where can improvements be made - SWAST?

- Improve data collection;
- Engage with appropriate forums;
- Work with providers in each CCG area;

What do you need from the ambulance service?



Summary

- Working with care homes, nursing homes and domiciliary care is a priority for SWAST;
- Committed to finding solutions that benefit the wider healthcare system;
- Real desire to ensure this cohort of patients receive the RC;



Questions?

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www.swast.nhs.uk/care